



# Association of Depressive Symptoms with Recurrent Falls: A Cross-Sectional Elderly Population Based Study and a Systematic Review

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Background: Screening of depressive symptoms is recommended in recurrent fallers. Compared to the 30-item and 15-item Geriatric Depression Scales (GDS), the 4-item GDS is easier to administer and quicker to perform. The association between abnormal 4-item GDS score and recurrent falls has not yet been examined. In addition, while depressive symptoms-related gait instability is well known, the association with recurrent falls has been few studied. Objective: 1) To examine the association between abnormal 4-item GDS score and recurrent falls in community-dwelling older adults using original data from health examination centers (HEC) of French health insurance of Lyon, and 2) to perform a systematic review of studies that examined the association of depressive symptoms with recurrent falls among older adults. Methods: Firstly, based on a cross-sectional design, 2,594 community-dwellers (mean age 72.1 +/- 5.4years; 49.8% women) were recruited in HEC of Lyon, France. The 4-item GDS score (abnormal if score  $\geq 1$ ) and recurrent falls (i.e., 2 or more falls in the past year) were used as main outcomes. Secondly, a systematic English and French Medline literature search was conducted on May 28, 2012 with no limit of date using the following Medical Subject Heading (MeSH) terms "Aged OR aged, 80 and over", "Accidental falls", "Depressive disorder" and "Reccurence". The search also included the reference lists of the retrieved articles. Results: A total of 19.0% (n=494) participants were recurrent fillers in the cross-sectional study. Abnormal 4-item GDS score was more prevalent among recurrent fallers compared to non-recurrent fallers (44.7% versus 25.0%, with  $P < 0.001$ ), and was significantly associated with recurrent falls (Odd ratio (OR)=1.82 with  $P < 0.001$  for full model; OR=1.86 with  $P < 0.001$  for stepwise backward model). In addition to the current study, the systematic review found only four other studies on this topic, three of them examining the association of depressive symptoms with recurrent falls using 30-item or 15-item GDS. All studies showed a significant association of depressive symptoms with recurrent falls. Conclusions: The current cross-sectional study shows an association between abnormal 4-item GDS score and recurrent falls. This association of depressive symptoms with recurrent falls was confirmed by the systematic review. Based on these results, we suggest that recurrent falls risk assessment should involve a systematic screening of depressive symptoms using the 4-item GDS.

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